

CLAIMS ONLY

Application Number: 1-1-1-1

Filing Date

Applicant(s)

52806

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep		Depend	Indep		Depend
1							51					
2							52					
3							53					
4							54					
5							55					
6							56					
7							57					
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40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep			2				Total Indep					
Total Depend			27				Total Depend					
Total Claims			29				Total Claims					